Post Permit Correspondence - 12/89 Folder # 7

## U.S. ENVIONMENTAL PROTECTION .



### REGION X

1200 SIXTH AVENUE SEATTLE, WASHINGTON 98101

SEP 16 1985

M/S 430

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Robert E. Smith General Manager Anchorage Water and Wastewater Utility 3000 Arctic Boulevard Anchorage, Alaska 99503-3898

Re: NPDES Permit No. AK-002255-1, Municipality of Anchorage

State I.D. No. AK850124-21A

Dear Mr. Smith:

We are issuing the National Pollutant Discharge Elimination System (NPDES) permit referenced above, which incorporates a 301(h) variance. The enclosed document authorizes your facility to discharge to the receiving waters indicated in your permit. Also included is the agency's response to the comments received during the public notice period on the draft permit.

This permit will become effective 30 days after the issuance date unless a request for an evidentiary hearing which meets the requirements of 40 CFR 124.74 is received. A copy of these requirements is enclosed for your information.

Sincerely,

Robert S. Burd

Director, Water Division

**Enclosures** 

Alaska Department of Environmental Conservation, Anchorage

Alaska Office of Management and Budget, Anchorage

PS Form 3811, July 1983 447-845	SENDER: Complete items 1, 2, 3 and 4.  Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.  1. Show to whom, date and address of delivery.  2. Restricted Delivery.						
-845	3. Article Addressed to:  Robert E, Smith, General Manager Anchorage water i wastewater Utility 3000 Arctic Blud.  Anchorage, AK 99503-3898  4. Type of Service:  Article Number  Pegistered   Insured Certified   COD   Express Mail						
DOMESTIC RETURN RECE	Always obtain signature of addressee or agent and DATE DELIVERED.  5. Signature - Addressee X  6. Signature - Agent X  7. Date of Delivery  8. Addressee's Address (QNLY if requested and fee paid)						
CEIPT		**					

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# RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to  Street and No.  P.O., State and ZIP Code  Postage \$  Certified Fee							
						Postage	\$
						Certified Fee	
Special Delivery Fee							
Restricted Delivery Fee							
Return Receipt Showing to whom and Date Delivered							
Return receipt showing to whom, Date, and Address of Delivery							
TOTAL Postage and Fees	\$						
Postmark or Date							

### SEP 1 6 1986

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General Manager
Anchorage Water and Wastewater Utility
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Sincerely,

Robert S. Burd Director, Water Division

#### Enclosures

cc: Alaska Department of Environmental Conservation, Anchorage

Alaska Office of Management and Budget, Anchorage

bcc: Water Compliance Section, M/S 513

Alaska Operations Office, EPA (Anchorage)

301(h) Task Force, EPA-HQ, WH 556 M 301(h) Task Force EPA-ORD, Newport

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